

UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF DELAWARE

EDWARD WISNIEWSKI and )  
MARY WISNIEWSKI, Co-Administrators )  
of the Estate of Eric E. Wisniewski, ) C.A. No.: 1:08-cv-00026 (GMS)  
Deceased, )  
Plaintiffs, ) JURY TRIAL DEMANDED  
)  
v. )  
)  
OCEAN PETROLEUM, L.L.C., and )  
BRUCE PREDEOUX, )  
)  
Defendants. )

**MAILING AFFIDAVIT**

STATE OF DELAWARE :  
:

NEW CASTLE COUNTY :  
:

On February 4, 2008, personally appeared before me, Kathryn S. Keller, who by me being duly sworn did depose and say that:

1. She is an attorney with Campbell & Levine, LLC, the attorneys of record for Plaintiffs in the above-captioned case.
2. She did cause a Complaint to be filed with the Superior Court of the State of Delaware in and for New Castle County on October 31, 2008. That same day, a Summons and Praecept were issued for service upon the Defendants through the Delaware Secretary of State.
3. On December 17, 2008, the Sheriff's return on the Secretary of State was returned and filed with the New Castle County Prothonotary's Office.
4. She did cause to be mailed by registered mail on December 18, 2007, return receipt requested, a copy of the return of process by the Sheriff of Kent County on the Secretary of State of Delaware, as well as a copy of the Original Complaint and the Notice required under

10 Del. C. § 3104 to Defendant Bruce Predeoux whose address is 29087 Raven Court, Salisbury, Maryland, 21801.

5. On January 10, 2008, Plaintiffs' counsel received the Original Complaint and Notice registered mail envelope with a notation that it was "unclaimed." The original mailing envelope and the original receipt given by the post office at the time of mailing the above documents are attached hereto as Exhibit A.

6. On January 11, 2008, Plaintiffs' counsel did cause to be mailed by registered mail, return receipt requested, a second copy of the return of process by the Sheriff of Kent County on the Secretary of State of Delaware, as well as a copy of the Original Complaint and the Notice required under 10 Del. C. § 3104 to Defendant Bruce Predeoux at 29087 Raven Court, Salisbury, Maryland, 21801.

7. On January 31, 2008, Plaintiffs counsel received the second registered mail envelope containing the Original Complaint and Notice with the notation "unclaimed." The second original mailing envelope and the original receipt given by the post office at the time of mailing the above documents are attached hereto as Exhibit B.

Dated: February 4, 2008

CAMPBELL & LEVINE, LLC

By:/s/Kathryn S. Keller

Kathryn S. Keller (DE 4660)  
800 N. King St., Suite 300  
Wilmington, DE 19801  
(302) 426-1900

Attorney for the Plaintiffs

SWORN TO AND SUBSCRIBED before me the day and year aforesaid

/s/Bruce Campbell  
NOTARY PUBLIC

## **EXHIBIT A**



016H26513832

**\$04.60**

12/18/2007

Mailed From 19899  
US POSTAGE

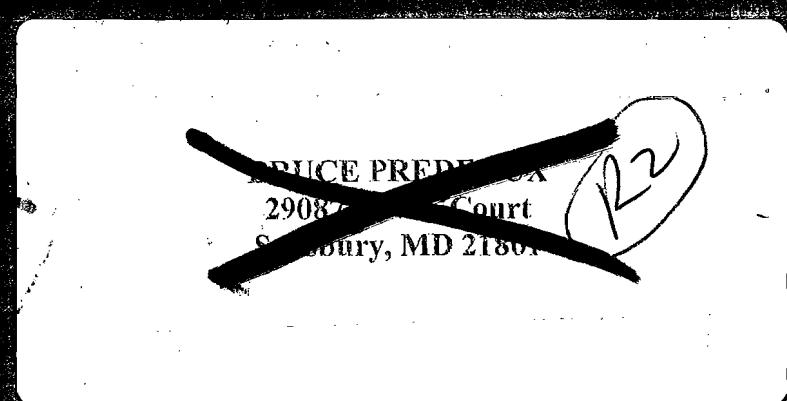


016H26513832

**\$11.65**

12/18/2007

Mailed From 19899  
US POSTAGE



SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Bruce *Bruckner*  
29087 *Ron* *Bruckner*  
Salisbury, MD *CLAIMED*

2. Article Number

(Transfer from service label)

RE 215 536 878 US

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

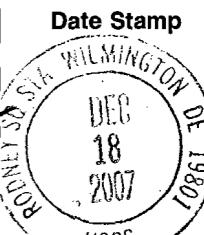
4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

102595-02-M-1540

|  |                     |
|--|---------------------|
| Registered No.   |                     |
| RE215530878US  |                     |
| Reg. Fee   | 9.50                |
| Handling Charge  | 2.15                |
| Postage  | Restricted Delivery |
| Received by  | Hand                |
| Customer Must Declare Full Value \$  |                     |
| <input type="checkbox"/> With Postal Insurance<br><input checked="" type="checkbox"/> Without Postal Insurance |                     |



Domestic insurance up to  
\$25,000 is included in the fee.  
International indemnity  
is limited.  
(See Reverse).

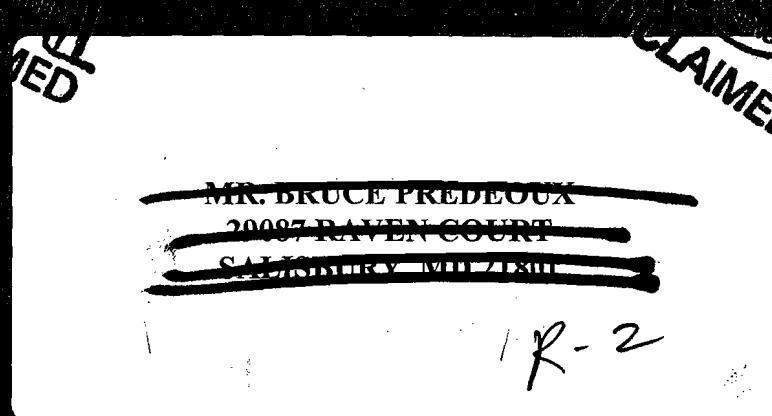
OFFICIAL USE

1387

|  |   |
|--|---|
| To Be Completed By Post Office   |   |
| Customer Must Declare Full Value \$  |   |
| <input type="checkbox"/> With Postal Insurance<br><input checked="" type="checkbox"/> Without Postal Insurance |   |
| Campbell & Levine, LLC   |   |
| 800 N. King St, Ste. 300   |   |
| Wilmington, DE 19801   |   |
| FROM   | Mr. Bruce Predcox                         |
| TO   | 290 87 Raven Court<br>Salisbury, MD 21801 |

PS Form 3806, Receipt for Registered Mail Copy 1 - Customer  
May 2004 (7530-02-000-9051)  
(See Information on Reverse)  
For domestic delivery information, visit our website at [www.usps.com](http://www.usps.com) ®

## **EXHIBIT B**



|  |                     |
|--|---------------------|
| <b>SENDER: COMPLETE THIS SECTION</b>   |                     |
| <ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul> |                     |
| <p>1. Article Addressed to:<br/><i>Mr. Bruce B. BROWN<br/>29087 Kelly Lane<br/>Salisbury, MD 21801</i></p>   |                     |
| <p>2. Article Number<br/><i>(Transfer from service label)</i></p>  |                     |
| <p>PS Form 3811, February 2004</p>   |                     |
| <b>COMPLETE THIS SECTION ON DELIVERY</b>   |                     |
| <p>A. Signature<br/><b>X</b></p>   |                     |
| <p><input type="checkbox"/> Agent<br/><input type="checkbox"/> Addressee</p>   |                     |
| B. Received by (Printed Name)  | C. Date of Delivery |
| <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/>If YES, enter delivery address below: <input type="checkbox"/> No</p>  |                     |
| <p>3. Service Type</p>   |                     |
| <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br/><input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise<br/><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>  |                     |
| <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>  |                     |
| <p>RE 338 589 148 US</p>   |                     |
| <p>102595-U2-M-1540</p>  |                     |

|   |        |  |        |  |                 |        |   |         |        |                            |  |
|---|--------|--|--------|--|-----------------|--------|---|---------|--------|----------------------------|--|
| Registered No.<br>RE338589148US   |        | Date Stamp   |        |  |                 |        |   |         |        |                            |  |
|   |        | 0501   |        |  |                 |        |   |         |        |                            |  |
|   |        | 19   |        |  |                 |        |   |         |        |                            |  |
|   |        | 01/11/08   |        |  |                 |        |   |         |        |                            |  |
| <table border="1"> <tr> <td>Reg. Fee</td> <td>\$9.50</td> <td></td> </tr> <tr> <td>Handling Charge</td> <td>\$0.00</td> <td>Return Receipt <input checked="" type="checkbox"/> \$2.15</td> </tr> <tr> <td>Postage</td> <td>\$4.60</td> <td>Restricted Delivery \$0.00</td> </tr> </table> |        | Reg. Fee   | \$9.50 |  | Handling Charge | \$0.00 | Return Receipt <input checked="" type="checkbox"/> \$2.15 | Postage | \$4.60 | Restricted Delivery \$0.00 |  |
| Reg. Fee  | \$9.50 |  |        |  |                 |        |   |         |        |                            |  |
| Handling Charge   | \$0.00 | Return Receipt <input checked="" type="checkbox"/> \$2.15  |        |  |                 |        |   |         |        |                            |  |
| Postage   | \$4.60 | Restricted Delivery \$0.00   |        |  |                 |        |   |         |        |                            |  |
| Received by <i>Suelo</i>  |        | Domestic Insurance up to \$25,000 is included in the fee. International Indemnity is limited. (See Reverse).   |        |  |                 |        |   |         |        |                            |  |
| Customer Must Declare<br>Full Value \$ <b>\$0.00</b>  |        | <input type="checkbox"/> With Postal Insurance<br><input checked="" type="checkbox"/> Without Postal Insurance |        |  |                 |        |   |         |        |                            |  |
| <b>OFFICIAL USE</b>   |        |  |        |  |                 |        |   |         |        |                            |  |
| To Be Completed By Customer<br>(please Print)<br>All Entries Must Be In Ballpoint or Typed  |        | FROM<br><i>Campbell &amp; Levine, LLC<br/>800 N. King St., Suite 300<br/>Wilmington, DE 19801</i>              |        |  |                 |        |   |         |        |                            |  |
|   |        | TO<br><i>Mr. Bruce Predeoux<br/>29087 Raven Court<br/>Salisbury, MD 21801</i>                                  |        |  |                 |        |   |         |        |                            |  |

PS Form 3806, Receipt for Registered Mail Copy 1 - Customer  
 May 2004 (7530-02-000-9051)  
 (See Information on Reverse)  
 For domestic delivery information, visit our website at [www.usps.com](http://www.usps.com) ®